



Review Article

UTILITY OF AGNIKARMA IN DAY TO-DAY PRACTICE

Padma^{1*}, Srinivas Masalekar²

¹Associate Professor, Department of PG studies in Shalyatantra, Sri Sri College of Ayurvedic Science and Research Hospital, Bengaluru.

²Professor and HOD, Department of PHD and PG Studies in Shalyatantra, Government Ayurveda Medical College Bengaluru.

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ABSTRACT

Agnikarma is an important para surgical procedure used in Ayurveda widely accepted for pain management since ages. The therapy includes the controlled transfer of varied degree of heat to the affected part with wide therapeutic intentions. Acharya Sushruta, the pioneer of *Agnikarma* stresses on multifaceted utility of *Agnikarma* and mentioned that it could be a potential alternative when management using medicine surgery or *Kshara* fails. He claims non-recurrence of benign pathologies when treated by *Agnikarma*. Though one can be fascinated by these claims, deeper understanding of the procedure is much essential to achieve the success. As therapy requires fire which could be hazardous and end up in burns. Thus, it is very essential to analyze *Agnikarma vidhi* in depth and understand logic behind selection of ideal patient, choosing the right device and conducting the procedure without any un toward event with proper precautions. Also knowing the idea behind contraindications allows us to prevent complications in current era. So here is an attempt to understand the rationality behind the various steps included in *Agnikarma*.

INTRODUCTION

Ayurveda, the time-tested medical science, has always come up with solutions for various sufferings of mankind. It has proven its capacity in both preventive and curative perspective since Vedic period. There is wide popularity and practice for Ayurveda as fraternity with herbo-mineral preparations. But there are fewer acceptances about the various para-surgical procedures mentioned in the science.

Agnikarma is one such great contribution by Acharya Sushruta in the field of para-surgical procedure. The therapy includes the controlled transfer of varied degree of heat to the affected part with wide therapeutic intentions. Though *Agnikarma* is widely used in pain management, its clinical utility is much wider. It is not mere tool for pain management but also can be utilized for excision, hemostasis and management of hernia.

Acharya Sushruta himself promoted the *Agnikarma* and mentioned that it could be a potential alternative for diseases that are not managed by *Bheshaja*, *Shastra* or *Kshara* can be treated using *Agnikarma*. The effect of *Agnikarma* that is prognosis is termed as “*Apunarbhava*” which means non-recurrence of ailments which are treated by *Agnikarma*. Acharya Dalhana while commenting, adds that it is applicable to various benign tumor pathologies as well.^[1]

Thus, there is a need to practice this multifaceted therapeutic procedure in wide spectrum of ailments. So here is an attempt to throw light on utility of *Agnikarma* as per various scholars.

Prerequisites for Agnikarma

The entire procedure of *Agnikarma* can be summarized as follows,

1. Pre-operative (*Purva karma*)
2. Operative (*Pradhana karma*)
3. Post-operative (*Paschat karma*)

Poorva karma

The prerequisites of *Agnikarma* are arranged in this step. This includes:

- Selecting ideal season for *Agnikarma* that is except *Greeshma* and *Sharad*.^[2]

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- Collecting and keeping the materials essential for the procedure and management of complications.
- Preparing the patient by giving *Picchila anna sevana*.^[3]

Like any other therapeutic procedures in Ayurveda, *Agnikarma* also requires *Chikitsa chatushpada* that is well trained Physician, the specific instrument. The attender and the suitable patient. As general qualities of surgeon and attender holds good for *Agnikarma* too, let us focus on instruments and patients.

Dahanopakarana^[4-7]

These are the materials used for *Agnikarma*. The wide range of *Dahanopakarana* can be procured from collected from different resources.

They can be classified as:

1. Plant resources

Pippali, Taila, Guda, Sarjarasa, Yastimadhu, Varti (lighted wick).

2. Animal resources

Aja shakrit (goat's excreta), *Godanta* (cow's teeth), *Madhu, Madhuchista, Vasa, Ghrita*.

3. Mineral resources

Shara (arrow head), *Shalaka* (metal rod), *Jambavostha, Suchi, Suryakanta mani* (rock crystal).

Based on therapeutic use, these materials can be further classified as,

- Those with definite shape suitable for *Ruksha Agnikarma* (*Pippali, Shalaka*).
- Those which are liquid, unctuous, suitable for *Snigda agnikarma* (Ex: *Taila, Madhu*) ideally for deeper *Dhatu*

Pradhana karma

Surgeon with his intellectual power can decide and utilize different *Dahanopakarana* for *Chedana* (excision), *Bhedana* (incision), and pain management or even to stop haemorrhage. In general, following are the indications of *Agnikarma* as recommended by various scholars:

Table 1: Indications of *Agnikarma* by Various *Acharyas*^[8-23]

S.No	Vyadhi	C.S	S.S.	A.S.	A.H.	B. P.	Y.R.	G.N.
1	<i>Shiro roga</i>	-	+	+	+	-	-	-
2	<i>Ardhavabhedaka</i>	+	-	-	-	-	-	-
3	<i>Vartma roga</i>	-	+	-	-	-	-	-
4	<i>Shlishta vartma</i>	-	-	+	+	-	-	-
5	<i>Pakshamakopa</i>	-	+	+	-	-	+	+
6	<i>Alaji</i>	-	-	+	+	-	-	-
7	<i>Arbuda</i>	-	-	-	+	-	-	-
8	<i>Puyalasa</i>	-	-	-	+	-	-	-
9	<i>Abhishayanda</i>	-	-	+	-	-	-	-
10	<i>Adhimantha</i>	-	+	+	-	-	-	-
11	<i>Lagana</i>	-	+	+	+	-	-	-
12	<i>Medoja-ostharoga</i>	-	+	+	+	-	-	-
13	<i>Danta nadi</i>	-	+	-	+	+	+	+
14	<i>Krimi danta</i>	-	+	+	+	-	-	-
15	<i>Adhi danta</i>	-	-	+	+	-	+	+
16	<i>Shita danta</i>	-	-	+	+	-	-	-
17	<i>Danta vridhhi</i>	-	-	+	+	-	-	-
18	<i>Jalarbuda</i>	-	-	+	+	-	-	-
19	<i>Arsha</i>	-	+	+	+	-	-	-
20	<i>Nasa arsha</i>	-	-	+	+	-	-	-
21	<i>Karnarsha</i>	-	-	+	+	-	-	-
22	<i>Lingarsha</i>	-	-	-	+	-	-	-
23	<i>Yoni arsha</i>	-	-	-	+	-	-	-
24	<i>Bhagandhara</i>	+	+	+	+	+	-	+

25	<i>Chippa</i>	-	+	-	-	-	-	-
26	<i>Kunakha</i>	-	+	-	-	-	-	-
27	<i>Kadara</i>	-	+	+	+	+	+	+
28	<i>Valmika</i>	-	+	+	+	+	+	-
29	<i>Jatumani</i>	-	+	+	+	+	+	+
30	<i>Masaka</i>	-	+	+	+	+	+	+
31	<i>Thilakalaka</i>	-	+	+	+	+	+	+
32	<i>Charmakila</i>	-	+	+	+	+	+	+
33	<i>Prasupti</i>	-	+	-	+	-	-	-
34	<i>Visha chikitsa</i>	+	-	-	-	-	-	-
35	<i>Sarpa damsha</i>	+	+	+	+	-	-	-
36	<i>Alarka visha</i>	-	+	-	+	-	-	-
37	<i>Luta visha</i>	-	-	+	+	-	-	-
38	<i>Mushaka visha</i>	-	-	+	+	-	-	-
39	<i>Gridhrasi</i>	+	-	-	-	-	-	-
40	<i>Vataja Shula</i>	-	+	-	-	-	-	+
41	<i>Vishwachi</i>	-	-	+	+	-	-	-
42	<i>Galaganda</i>	-	+	+	+	-	-	-
43	<i>Gandamala</i>	+	-	+	+	-	-	-
44	<i>Apachi</i>	-	+	+	+	+	-	+
45	<i>Granthi</i>	+	+	+	+	-	+	-
46	<i>Antra vriddhi</i>	-	+	+	+	-	+	-
47	<i>Shlipada</i>	-	+	+	+	-	-	-
48	<i>Nadi Vrana</i>	-	+	+	-	-	-	-
49	<i>Upadamsha</i>	-	+	-	-	-	-	-
50	<i>Gulma</i>	+	-	+	+	-	-	-
51	<i>Visuchika</i>	-	+	+	+	-	-	-
52	<i>Alasaka</i>	-	+	-	-	-	-	-
53	<i>Vilambika</i>	-	+	-	-	-	-	-
54	<i>Sanyasa</i>	+	-	-	-	-	-	-
55	<i>Unmada</i>	-	-	-	+	-	-	-
56	<i>Yakrutodara and Plihodara</i>	-	+	+	+	+	-	-
57	<i>Shonita atipravriti</i>	+	+	+	-	-	-	-
58	<i>Vatakantaka</i>	-	-	+	+	+	+	-
59	<i>Sira sandhi chheda</i>	-	+	+	-	-	-	-
60	<i>Visarpa</i>	+	-	-	-	-	-	-
61	<i>Shotha</i>	+	-	-	-	-	-	-

From the Table 1, it is clear that *Agnikarma* is not only utilizes in surgical disorders but also in other branches of Ayurveda such as *Shalakhya tantra*, *Visha chikitsa*, *Kayachikitsa* and *Bala roga*. Acharya Harita emphasized the usage of *Agnikarma* in psychiatric disorders such as *Murcha*, *Apasmara* and *Bala Apasmara*.^[24,25] Acharya Vangasena along with *Bhaishajyaratnavali*, and *Yogaratanakara* emphasizes on *Agnikarma* using *Suchi* in *Vatakantaka*.^[26] By combining and comparing the scattered references in various scripts we can adopt a guideline to practice in a safer way.

Contra-indications of Agnikarma

As *Agnikarma* is an intense therapy, it can't be performed on all patients in spite absolute indications. One has to review patient's physical and mental strength along with the comorbidities before advocating *Agnikarma*. In addition, person contra indicated for *Swedana* and *Kshara karma* are also denied for *Agnikarma*. In general, the contra indications are listed in the table number 2.

Table 2: Contra-Indications of Agnikarma^[27,28,29]








Person unable to tolerate procedure	Who has <i>Raktha/Pitta dushti</i>	Physiological causes	Psychological causes	<i>Agni dushti</i>	<i>Udaka vaha sroto dushti</i>
<i>Durbala</i>	<i>Bhinna Kosta</i>	<i>Pitta Prakriti</i>	<i>Bhiru</i>	<i>Vidagdha</i>	<i>Udara Roga</i>
<i>Kshaya</i>	<i>Antaha Shonita</i>	<i>Vridhdha</i>	<i>Kruddha</i>	<i>Sthula</i>	<i>Chhardi</i>
<i>Guda Bhramsha</i>	<i>Anuddhrita Shalya</i>	<i>Bala</i>		<i>Ajirna</i>	<i>Adhya Rogi</i>
<i>Nasta Sangya</i>	<i>Aneka Vrana</i>	<i>Garbini</i>		<i>Jvara</i>	<i>Prameha</i>
<i>Shoshita</i>	<i>Pandu</i>	<i>Kshuda</i>			<i>Atisara</i>
<i>Ojo kshaya</i>	Who has taken Alcohol	<i>Rajaswala</i>			<i>Trishna</i>
<i>shranta</i>	<i>Timira</i>				<i>Ruksha</i>
<i>Hrit roga</i>	<i>Visha</i>				
	<i>Rakthapitta</i>				
	<i>Kshata</i>				

Further, *Acharya Charaka*, denies *Agnikarma* over *Vrana* of *Snayu, Marma, Netra, Kushta* and *Vrana* with *Visha* and *Shalya*. *Ashtanga Hridayakara* identifies *Sevani, Gala, Nabhi, Vrushana, Medra* and perforated alimentary canal as sites to be avoided for *Agnikarma*.

Shapes of Agnikarma^[30]

There are totally 7 shapes also known as *Pranidhana aakara Vishesha* that can be created using *Agnikarma* as depicted in table 3.

Table 3: Dahana Akriti

S.No	Dahana akriti	Shape
1	<i>Valaya</i>	
2	<i>Bindu</i>	
3	<i>Vilekha</i>	
4	<i>Pratisarana</i>	
5	<i>Ardhachandra</i>	
6	<i>Swastika</i>	
7	<i>Ashtapada</i>	

Indication of different shapes

- *Valaya* or the circular shape is preferred in case of excision of a mass from its base.
- *Bindu* is the dots produced from tip of *Shalaka* for pain management.
- *Vilekha* or 3 parallel lines are marked above wrist joint to treat *Apachi*.
- *Pratisarana* or the rubbing type of *Agnikarma* is performed in *Danta nadi* after laying it open.
- *Ardhachandra* is the specific shape advised in inguinal hernia to prevent its descent to scrotum.

Agnikarma Sthana^[31]

Table 4: Locations of Agnikarma According to Disease

Disease	location
<i>Shiro roga, Adhimantha</i>	Over <i>Bhru, Lalata</i> and <i>Shankha</i>
<i>Vartma-gata-roga</i>	<i>Vartma romakupa</i> after covering eyes with wet cotton

<i>Ugra ruja</i> in <i>Twacha, Mamsa, Sira, Snayu, Sandhi, Asthi</i>	At the place of <i>Vedana</i>
<i>Utseda-yukta kathina supta – Mamsa</i>	At the place of disease
<i>Vrana, Granthi, Arsha, Arbuda, Apachi, Bhagandhara, Shlipada, Charmakila, Thilakalaka,</i>	At the place of the disease
<i>Antra vridhhi</i>	At <i>Vankshana</i>
<i>Sandhi-Chedana, Sira Chedana, Nadi-gata ati-rakta-pravriddhi</i>	At the place of the disease

In Table 4, it is evident that majority of the *Agnikarma* is performed on the site of lesion with an intention of either excising or to relieve pain. But based on the type of tissue and depth of lesion different *Dahanopakarana* are advised.

Procedure^[32]

- Make the patient lie down with head towards the east.
- Immobilize patients with the help of assistants.
- Clean the body part of the patient where *Agnikarma* is intended.
- Heat the suitable *Dahanopakarana* tip till red-hot.
- Place it on the intended body part to create marks of required shape.
- Care must be taken to reach up to desired depth as required for the disease and till the symptoms of proper cauterization manifest.
- Throughout the procedure, patient is constantly assured by encouraging words.
- During the procedure if the patient feels discomfort, one should do *Sheetala jala sinchana* to comfort the patient.

Samyak dagdha lakshanas

An ideally executed *Agnikarma* will be devoid of complications, leaves a scar which is neither elevated nor depressed bears the colour of *Talaphala*. Based on tissue involved, an ideal *Agnikarma* shows specific characteristic features as listed in Table 5.

Table 5: Characteristic Feature of *Agnikarma* Based on Tissue Involved

Type of tissue involved	Ideal <i>Agnikarma</i> indicator
<i>Twak</i> (skin)	<i>Shabda pradurbhava</i> (sound), <i>Durgandhatha</i> (smell of burning skin) <i>Twak sankocha</i> (contracted skin).
<i>Mamsa</i> (muscular tissue)	<i>Kapotha Varnatha</i> (colour of dove), <i>Alpa swayathu</i> (edema), <i>Alpa Vedana</i> (less pain), <i>Sushka</i> and <i>Sankuchitha Vranatha</i> (scar will be dry and contracted.)
<i>Sira snayu</i> (tendons and blood vessels)	<i>Krishnonnatha Vranatha</i> (ulcer will be black and elevated) <i>Srivasannirodha</i> (stoppage of discharge).
<i>Sandhi asthi</i> (joints and bones)	<i>Rookshatha</i> (dryness), <i>Arunatha</i> (red colour), <i>Karkasha</i> and <i>Sthira Vranatha</i> (hard and rough ulcer)

Paschat karma

After *Agnikarma* has been done in the proper manner, the area (of burning) should be anointed with mixture of honey and ghee. Acharya Sushruta says the heat from *Agni*, immediately causes vitiate *Raktha* and in turn that of *Pitta*. To combat this *Pitta* and *Raktha dushti*, *Dravya* that have cold potency along with healing property are needed. Application of drugs such as *Tuga ksheeri* (*Curcuma angustifolia* Roxb), *Plaksha* (*Ficus virens*), *Chandana* (*Santalum album*), *Gairika* (iron oxide), *Amrita* (*Tinospora cordifolia*) are also indicated in case of ideal *Agnikarma* procedure.

DISCUSSION

Need of *Purva karma* while performing *Agnikarma*

Acharya Sushruta is pioneer to identify the importance of *Trividha karma* for the success of any therapeutic procedure. It emphasizes even on minute details for smooth conduction of the procedure. *Agnikarma* being a *Ushna chikitsa*, certainly will aggravate *Pitta dosha*. Thus, *Greeshma* and *Sharad*, two seasons are contraindicated for *Agnikarma*. So also, *Pitta prakriti* person and one who suffers from *Pittaja* disorders are denied of *Agnikarma* in general. But in emergency where *Agnikarma* is the only option, procedure is conducted with suitable remedial

measures such as covering with cold petals, smearing and food. Even in a genuine indicated case, *Agnikarma* is preceded by *Sheeta*, *Mridu* and *Picchila veerya* food in order to combat resulting raise in *Ushma*.

Ideal Dahanopakarana

There are more than 17 *Dahanopakarana* referred by *Acharyas* in different context. These are procured from nature and have variety of shapes. The rationality of choosing right instrument is based on type of *Agnikarma*, their shape and heat retention capacity.

When *Agnikarma* is intended to do *Twak daha*, the material with solid shape and lesser heat retention capacity must be opted.

Ex:

- i. Superficial skin lesions such as *Tilakalaka*, *Mashaka*, *Charmakeela* can be removed using *Pippali*, *Aja shakrit*, *Godanta* or *Suryakanta mani*. These materials have narrow or blunt tip with shorter heat retention capacity. This ensures targeted action without damaging surrounding soft tissue.
- ii. While performing *Mamsa dahana* for deep seated ailments such as *Granthi*, *Arshas* and *Dushta vrina*, instruments that can carry intense heat and retain for prolonged time is required. This makes *Jambavosta* and *Loha shalaka* as the ideal instrument for *Mamsa dahana*.
- iii. When *Agnikarma* need to reach deeper *Dhatu*s such as *Sira*, *Snayu*, *Asthi* and *Sandhi*, *Snigda agnikarma* must be performed. Honey, jaggery, ghee, oil are better choice in such condition due to their penetrating nature.

Understanding Pradhana karma

i) Selection of patient for therapy

When analyzing indication of *Agnikarma* it is noticed that most of the disease are *Vata kaphaja* in nature. They affect mostly to *Twak* and *Mamsa dhatu*. They are ideal for *Ruksha dahana* more specifically to *Twak* or *Mamsa dahana*. There are indications of *Sira snayu dahana* which are only emergency circumstances such as to stop hemorrhage. Also, in case of wide excisions as in *Bhagandara* or deep-seated diseases *Snigda* variety of *Agnikarma* is indicated.

Assessment of strength of the patient before performing *Agnikarma* is given at most priority by *Acharya Sushruta*. Debilitating conditions such as *Ojo Kshaya*, *shosha*, *Hridroga* are not suitable for *Agnikarma*. Even an elderly person, a child, a pregnant woman may not tolerate the procedure hence are not advised for *Agnikarma*, Heat used in *Agnikarma* will affect *Pitta* and *Rakta* along with *Agni*. Hence person with *Pitta prakriti*, who are suffering from *Pittaja*, *Raktaja vikara*, who has issues related with *Jataragni* are to be denied of the therapy. Considering the

gentleness of the area such as *Marma*, *Sevani*, *Vrushana* and *Medra agnikarma* is contra indicated in these areas.

These measures will ensure the reduction of complications and smooth conduction of the *Agnikarma* uneventfully.

ii) Rationality of Dahana akriti

Though *Agnikarma* has better results the fact that it is a painful procedure cannot be ruled out. The reason behind the different shapes can be understood in following way:

- i. It is an attempt to reduce the discomfort by minimizing tissue damage.
Ex: *Bindu akriti* in pain management.
- ii. Shapes are chosen as per the action required.
Ex: *Valaya* is adopted to excise the base of pedunculated mass (wart, polyp).
- iii. It will prevent further progress of the disease.
Ex: *Ardha chandrakara* above mid inguinal point where deep inguinal ring is situated may produce scar tissue thus narrowing defect thus preventing hernia to enter scrotum.
- iv. To destroy the pathological tissue completely.
Ex: *Pratisarana* on laid open cavities such as *Dantanadi* and *Bhagandara* ensures complete destruction of pathological tissue. Hence prevents recurrence.
- v. It will provide cosmetically better effect when performed on exposed body parts such as face or arm.
Ex: *Swastika* and *Ashtapada*.

iii) Guidelines to choose site for Agnikarma

In general, if required action of the *Agnikarma* is excising the growth it will be done at the base of the growth. But if such growth is present near a vital organ like eyes, the organ is protected from intense heat in advance by covering with lotus petals.

If *Agnikarma* is done areas near the *Marma pradesha*, (Ex. *Vankashana* in case of *Antra vridhhi*), proper precaution is must and choose *Dahanopakarana* which prevent *Marma desha*. (*Ardha chandra shalaka*)

If *Agnikarma* is done for pain management, area of maximum tenderness is selected (*Ugra rujatva*).

If *Agnikarma* is done for deeper *Dhatu*, the same area is selected with a *Dahanopakarana* which has penetrating property (*Suchi*).

When the intention of *Agnikarma* is to stop hemorrhage, bleeding vessel is identified and subjected to *Agnikarma*.

Benefits of Paschat karma

Grita and *Madhu* combination is well known for its *Pitta* alleviating property along with good wound

healer. It will combat the burning sensation and other discomfort experienced by the patient post *Agnikarma* and ensures early vanishing of burn marks. The drugs such as *Tuga ksheeri*, *Amrita*, *Plaksha* are also possessing similar properties. Using *Shatadouta grita*, *Gritakumari swarasa*, are few other options which will serve similar therapeutic effect.

Mode of action of *Agnikarma*^[33]

The response of the body to applications of heat is governed primarily by the temperature achieved in the tissues and the duration of temperature elevation. Mild heating which does not exceed 40°C, usually produces only mild responses. Localised vigorous heating has a major effect on the blood flow, producing substantial local inflammation, the body's effort to initiate healing.

- Heat causes vasodilatation, increases local circulation and facilitating elimination of metabolic waste products.
- Heat increases tissue metabolism. This increases nutritional demands of the cells, increases oxygenation of tissue, reduces pain, promotes muscle relaxation and decreases congestion in deep visceral organs.
- Heat raises the pain threshold of sensory nerve endings and thus may break the pain cycle.
- Heat increases the extensibility of connective tissue thereby promotes activity in stiff joints and tight muscles.

Gate Control Theory^[34]

It says an intense stimulus such as heat is carried quickly to cortex which stimulates endogenous analgesic system and close the gate for pain neuro transmitters by secreting serotonin and in turn opioids. This inhibits substance P in peripheral nervous system and block pathway for pain through spino thalamic tract.

CONCLUSION

Agnikarma is always appreciated greater than *Kshara karma* based on its promising result of non-recurrence of disease. It is the potential option when other therapeutic measures fail to heal the disease. But Acharya Sushruta clearly mentioned that greatness of *Agnikarma* is in terms of its action. He clearly hints that the therapeutic efficacy of *Agnikarma* is purely operator based. He quotes:^[35]

रोगस्य संस्थानमवेक्ष्य सम्यङ् नरस्य मर्माणि बलाबलं च ।
व्याधिं तथर्तुं च समीक्ष्य सम्यक् ततोऽव्यवस्येद्विषग्निकर्म ॥१२॥

It says that in order to achieve the success in *Agnikarma*, the physician has to choose the appropriate *Dahanopakarana* by considering site and shape of lesion along with sufficient precautions about the indication and contraindications of the disease and season.

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***Address for correspondence**

Dr. Padma

PhD Scholar,

Associate Professor,

Department of PG studies in

Shalyatantra

Sri Sri College of Ayurvedic Science

and Research Hospital, Bengaluru.

Email: drpadmabhats@gmail.com

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